



2876
[Signature]
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Paul Dvorkis

Serial No.: 09/918,358

Filed: July 30, 2001

Title: TWO-DIMENSIONAL OPTICAL CODE SCANNER WITH
SCANNING PATTERN HAVING REGION OF GREATER
APPARENT BRIGHTNESS FOR ASSISTING
ALIGNMENT OF SCANNING PATTERN

Docket No.: 16-640

Art Unit: 2876

Examiner: Kim, Ahshik

Watts Hoffmann Co., L.P.A.
1100 Superior Avenue, Suite 1750
Cleveland, OH 4414-2518

Mail Stop: Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Dear Sir:

In response to the Office Action having a mailing date of August 9, 2004, please consider the amendments and remarks set forth below.

10/21/2004 HALI11 00000007 09918358

01 FC:1202

396.00 DP

I hereby certify that this paper is being deposited
today with the U.S. Postal Service as 1st Class
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22313-1450

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10-15-04

By:

[Signature]



PATENT
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IN RE APPLICATION OF: Paul Dvorkis

Serial No.: 09/918,358

Group No.: 2876

Filed: July 30, 2001

Examiner: Kim, Ahshik

For: TWO-DIMENSIONAL OPTICAL CODE SCANNER WITH SCANNING
PATTERN HAVING REGION OF GREATER APPARENT BRIGHTNESS FOR
ASSISTING ALIGNMENT OF SCANNING PATTERN

Docket No.: 16-640

MAIL STOP FEE AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for approval by examiner for this application.

STATUS

2. Applicant is

_____ a small entity
XXX other than a small entity.

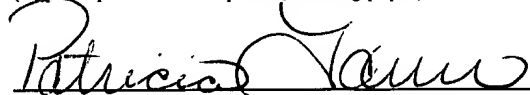
CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: "Mail Stop Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450".

Patricia L. Tanner

(Type or print name of person mailing paper)

Date: October 15, 2004


(Signature of person mailing paper)

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37CFR 1.136 apply.

(complete (a) or (b) as applicable)

(a) _____ Applicant petitions for an extension of time for the total number of months checked below:

	Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
_____	one month	\$ 110.00	\$ 55.00
_____	two months	410.00	205.00
_____	three months	930.00	465.00
_____	four months	1,450.00	7250.00

Fee \$ _____

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

_____ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

(b) XXX Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)		Small Entity		Other than a Small Entity
	Claims Remaining After Amendment		Highest No. Previously Paid for		Present EXTRA	Rate	Addit. Fee		Addit. Fee
TOTAL	44	MINUS	22	=	22	x 9 = \$	x 18 =	\$396.00	
INDEP.	3	MINUS	3	=		x 44 = \$	x 88 =	\$	
_____	First Presentation of Multiple Dep. Claim					x 125 = \$	x 250 =	\$	

Total \$ _____ or Total \$396.00

* If the Highest No. Previously Paid for in this space is less than 20, enter "20".

** If the Highest No. Previously Paid for in this space is less than 3, enter "3".

(c) _____ No additional fee is required

OR

(d) XX Total additional fee required \$ 396.00

FEE PAYMENT

5. XXX Attached is a check in the sum of \$ 396.00
 Charge Account No. 23-0630 in the sum of \$ _____

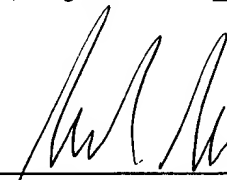
Fee Deficiency

6. XXX If any additional extension and/or fee is required, this is the request therefor and to charge Account No. 23-0630

And/Or

- XXX If any additional fee for claims is required, charge Account No. 23-0630.

Reg. No.: 50,732



Signature of Attorney

Tel. No.: (216) 241-6700
Fax No.: (216) 241-8151

Michael A. Miller

Type or Print Name of Attorney

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